Handbook for the Identification and Review of Students with Severe Disabilities 2014/2015

Alberta Government

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Section 1 – General Information

Introduction

Alberta Education provides funding to school authorities for students with severe disabilities to support the provision of specialized supports and services in an education program. This applies to private schools, designated special education schools and charter schools. Funding continues to be based on the approval of students on an individual basis.

The *Handbook for the Identification and Review of Students with Severe Disabilities* presents case studies to assist school authorities in identifying students who may be eligible for specialized supports and services. Information related to severe disabilities funding requirements for private and charter schools is in the *Funding Manual for School Authorities 2014-2015 School Year*.

Identification of students and the use of either the severe or mild/moderate special education codes continue to require a diagnosis and supporting assessments. It is important that the special education codes only be used when there are documented disabilities. We do this in the best interests of the student and so that families and teachers are aware of the nature of the disability and what is being done to ensure the student has the maximum opportunity to learn. Special education codes should not be used when there is no substantiating documentation of a disability.

School authority personnel from private and charter schools should direct enquiries regarding the identification of students with severe disabilities and related funding to Learner Services Branch at (780) 415-0783, toll-free in Alberta by first dialing 310-0000.

School Jurisdictions

- With the implementation of the inclusive education funding model, Alberta Education no longer requires school jurisdictions to conduct formal, specialized assessments, or require updated medical diagnoses every three years in order to receive funding to support the education of students with severe disabilities.
- There may be formal assessment requirements for AISH, PDD and federal funding support for students with disabilities who will be attending post-secondary institutions. Existing reports should be reviewed as part of the ongoing transition planning process.
- Decisions whether or not to update formal, specialized assessments should be made in consultation with the family and documented in the students Individualized Program Plan.
- To support the provision of programming, schools are encouraged to use a variety of assessment techniques and strategies in conjunction with formal, specialized assessment.

Private and Charter Schools

- Requests for Severe Disabilities Funding for grades 1 to 12 are restricted to Private and Charter schools.

- All Private and Charter Schools will continue to be required to use severe disabilities codes in order to receive this funding for Grades 1 to 12 in 2014/2015. School authorities are no longer required to conduct formal, specialized, diagnostic assessments every three years. Schools should retain the original diagnosis based on a specialized assessment from a qualified professional. If the disability has not changed, in place of updated medical or psychiatric assessments, schools should conduct a functional assessment approximately every three years to update the impact of the student's disabilities within the learning environment. This timeframe can be adjusted to meet the needs of the student and may occur at natural transitions (from school to school, from one level of schooling to the next). Decisions about requesting a re-diagnosis should be made in consultation with the family and, where appropriate, the student.

- Alberta Education does not require that a diagnosis of a severe emotional/ behavioural disability be made every two years. Decisions about requesting a re-diagnosis should be made in consultation with the family and, where appropriate, the student. The original diagnosis based on a specialized assessment from a qualified professional should be retained at the school level. Schools should continue to update programming and progress with functional behavioural assessment information approximately every three years. This timeframe can be adjusted to meet the needs of the student.

- Special education code information will be taken directly from school submissions through PASI for both September and March.

- There are different documentation requirements for funding requests for newly identified students with severe disabilities and those for whom funding is being renewed based on approvals from previous years.
  - For new funding requests, recent formal diagnostic assessment reports from qualified professionals are required to document the student's disability.
  - For renewed funding requests, if the disability has not changed, schools may submit a functional assessment to document the impact of the student's disability in the learning environment.

- Medical documentation that provides a diagnosis from qualified professionals should continue to be retained by the school. Alberta Education does not have a requirement that this information be updated every three years as most severe disabilities are permanent in nature.

  - In place of updated medical documentation, if the disability has not changed, schools should conduct a functional assessment approximately every three years to update the impact of the student's disabilities within the learning environment. This timeframe can be adjusted to meet the needs of the student and may occur at natural transitions (e.g. from school to school, from one level of schooling to the next)

- For the purposes of severe disabilities funding claims, current assessments are those that have been conducted by a qualified professional within the last three to five years.

- A one page summary by school staff of the student's current functioning is a requirement for all severe disabilities funding requests. Examples are included with each code to assist school personnel in preparing documentation.

- The *Student Monitoring Form 2014/2015* has been revised to reflect these changes.

2014/2015 Severe Disabilities Funding Process at a Glance

REQUIREMENT	RESPONSIBILITY	ACTION	DATE
Student identification for calculating funding grants other than the inclusive education grant	School jurisdictions and Francophone authorities	• Identify student registrations with a severe disabilities code in PASI • Resolve registration conflicts before sending information via PASI	Complete by Sept. 30, 2014 Submission by Oct. 3, 2014
Student identification for Severe Disabilities funding	Private and Charter schools	• Identify student registrations with a severe disabilities code in PASI • Resolve registration conflicts before sending information via PASI	Complete by Sept. 30, 2014 Submission by Oct. 3, 2014
Identification of students to be monitored	Learner Services Branch	• Learner Services Branch provides school with list of students to be monitored	Mid-October to mid-November 2014
Preparation of file documentation for monitoring	Private and charter school staff	• Complete Student Monitoring Form 2014/2015 and include – copies of recent assessment/ diagnostic reports – the IPP – one page summary of functioning • Send the file information to Learner Services Branch	Complete by mid-November 2014
Monitoring of student files	Learner Services Branch	• Review of student files	November 2014 to January 2015
Severe Disabilities Funding Payment based on September 30, 2014 enrollment	Learner Services Branch	• School authority advised of number of approved students and next monitoring dates	End of January 2015
	School Finance Branch	• School Finance Branch advised of number of approved students and finalizes payments	
Submission of appeal of September funding	Private and Charter school principals	• Letter to Director, Learner Services Branch – Do not submit new file, original files are used for appeals	January-February 2015
March Prorated Funding	Private and charter schools	• Identify students with severe disabilities who enroll after September 30, 2014. • Resolve any priority school conflicts. • Resolve registration conflicts before sending information via PASI • Resolve any transfer payments between private/charter schools.	Count as of March1, 2015 Submission by March 6, 2015

REQUIREMENT	RESPONSIBILITY	ACTION	DATE
Preparation of documentation for prorated funding monitoring	Private and charter school staff	• Complete Student Monitoring Form 2014/2015 and include – copies of recent assessment/ diagnostic reports – the IPP – one page summary of functioning	Complete by mid-March 2015
Monitoring of student files	Learner Services Branch	• Review of student files submitted for March prorated funding	April-May 2015
Severe Disabilities Funding Payment based on March 1, 2015 enrollment	Learner Services Branch	• School authority advised of number of approved students and next monitoring dates	May 2015
	School Finance Branch	• School Finance Branch advised of number of approved students and finalizes payments	
Submission of appeal of March funding	Private and charter school Principals	• Letter to Director, Learner Services Branch – Do not submit new file, original files are used for appeals	June 2015

Documentation Requirements

Charter schools, private schools, and designated special education private schools that receive funding from Alberta Education for students with severe disabilities must ensure that the following conditions are met:

- Funding for newly identified students with severe disabilities is based on all of the following requirements being met and implemented at the school level:
  - assessment and diagnosis by qualified personnel (Note: diagnosis alone is not sufficient to qualify for funding)
  - documentation/assessment of the student's current level of functioning in the learning environment
  - a current individualized program plan (IPP) that addresses the student's diagnosed needs
  - identification of the types of supports and services being provided to the student.

- The IPP must be supported by appropriate medical, psychological or other professional documentation for each student with a severe disability identified and attending a school of the authority.

- Students with severe disabilities must receive three or more levels of support identified below:
  a) a minimum 0.5 FTE one-to-one instruction/intervention (e.g., teacher and/or teacher assistant time)
  b) specialized equipment or assistive technology
  c) assistance with basic care (e.g., toileting, grooming, catheterization)
  d) frequent documentation of medical and/or behaviour status
  e) direct support services at a cost to the system (e.g., behaviour specialist, orientation and mobility specialist).

- School authorities will use the severe disabilities categories/codes and related criteria outlined in *Special Education Coding Criteria 2014/2015* and the *Handbook for the Identification and Review of Students with Severe Disabilities 2014/2015* to determine a student's disabling condition for severe disabilities identification purposes.

- Eligibility for severe disability funding is based on student registration information, as of the count date (September 30, 2014), that has been submitted to PASI by October 3, 2014.

Appeal of Severe Disabilities Funding

Charter, Private, and Designated Special Education Private Schools

In situations where charter or private schools, including designated special education private schools, disagree with the outcome of the monitoring process for severe disabilities funding, an appeal of the decision(s) can be made to the Director of Learner Services Branch using the process outlined below.

- School staff review the monitoring decision to clarify the rationale for the appeal.
- School administrator writes the Director of Learner Services Branch to request an appeal of the decision(s) of the monitoring process.
- The request for an appeal must be received by Learner Services Branch within ten (10) working days of the school receiving written notification that the student was not approved for severe disabilities funding. Notification of the results of the monitoring process will be sent directly to the school principal via secure email.
- The appeal information submitted to the Director of Learner Services Branch must include:
  - student's name
  - severe disabilities code
  - Alberta Student Number (ASN).
- **No new information** can be added or considered during the appeal process.
- The originally submitted student documentation to support the appeal will be reviewed.
- After review of the appeal documentation, the reviewer may recommend that:
  - the original decision stands or
  - funding is approved.
- The final decision regarding the appeal will be made by the Director of Learner Services Branch and communicated in writing to the school authority and School Finance Branch.

Section 2 – Severe Disabilities Categories

Severe Cognitive (Intellectual) Disability (Code 41)

Special Education Coding Criteria

A funded student with a severe cognitive (intellectual) disability is one who:

- has a diagnosis by a qualified professional demonstrating significant deficits in intellectual functioning, such as reasoning, problem solving, planning, abstract thinking, judgment, academic learning, and learning from experience
- has adaptive behaviour deficits in the severe to profound range as measured on an adaptive behaviour scale (e.g., AAMR Adaptive Behaviour Scales-School: Second Edition (ABS-S:2); Vineland Adaptive Behaviour Scales; Scales of Independent Behaviour - Revised).[1]
- has severe delays in all or most areas of development
- frequently has other disabilities including physical, sensory, medical and/or behavioural
- requires constant assistance and/or supervision in all areas of functioning including daily living skills and may require assistive technology
- Functional assessments by a qualified professional will also be considered in cases where the student's disabilities preclude the use of a standardized assessment.

Questions and Answers

What are the main characteristics of a student who meets the special education coding criteria for a severe cognitive disability?

- The functional level is approximately less than one third of his/her chronological age on a standardized adaptive behaviour scale.
- The student may also:
  - be medically fragile
  - require assistive technology
  - have autistic-like, aberrant behaviours
  - have limited, if any, receptive or expressive language.
- The student's level of dependency requires mostly one-to-one and hand-over-hand assistance to perform tasks for ambulation or daily living and functioning.
- These students usually require extensive supports and services including one-to-one teacher assistant time, assistance with basic care, and additional therapeutic services.
- It is unlikely that the student will acquire basic numeracy and literacy skills.

[1] American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

What documentation is required to determine if the student meets the special education coding criteria?

- The use of adaptive behaviour scales to obtain functional ability scores in the severe to profound range is required. These students are not usually assessable using the WISC-IV or Stanford-Binet V.
- Once an initial diagnosis has been given and the student has a chronic disability that has not changed significantly, documentation from personnel specializing in the field may be sufficient for programming and to provide an evaluation of functioning.

What other supporting documentation relevant to the student's disabling condition and programming requirements should be provided?

- Physical therapy reports, occupational therapy reports, speech-language therapy reports or medical reports.

For additional information please refer to the case study on pages 10 to 13.

For sample IPP templates for students with moderate or severe cognitive disabilities, please visit:
http://www.learnalberta.ca/content/ieptLibrary/documents/en/ip/template_b.pdf.

Case Study — Brandon

Background *information, description* of severe disabling condition(s)	• Brandon is an eighteen-year-old student in a Life Skills Program at Uphill High School. • A recent AAMR Adaptive Behaviour Scales School: Second Edition and a functional assessment were completed by S. Adams, Registered Psychologist, indicating that Brandon's intellectual functioning and adaptive functioning in January 2013 was less than one third of his chronological age. • Brandon is ambulatory, non-verbal and requires ongoing assistance with his personal care.
Current supports/services in place	• Brandon is in a full-time life skills class with nine students, a 1.0 FTE teacher and 3.0 FTE teacher assistants. • Brandon requires one-on-one assistance for personal care, feeding and communication. • In consultation with a speech-language pathologist, a Picture Communication Symbols (PCS) program has been used on an iPad to modify instructional materials to Brandon's level. • Brandon is receiving consultation support from an occupational therapist to assist with fine motor skills and feeding issues. • His family is also accessing support from Family Support for Children with Disabilities and the I CAN Centre at the Glenrose Rehabilitation Hospital.
Individualized Program Plan	• Brandon's IPP was developed by the learning team, including his parents. • Goals reflect his needs in communication, fine motor skills, personal care and life skills development.

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Student Monitoring Form Severe Disabilities Funding 2014/2015

New ☐ **Renewal** ☒

PLEASE CHECK CODE	
X	**41 Severe Cognitive**
	42 Severe Emotional/Behavioural
	43 Severe Multiple
	44 Severe Physical or Medical
	45 Deafness
	46 Blindness

School Authority ABC Authority

School Uphill High School

Student Name Brandon

Alberta Student Number (ASN) xxxxxxxxx

Birth date (yyyy/mm/dd) 1996/07/15 **Grade** ungraded

Placement (describe) full time life skills program

1. Supporting Documentation from the appropriate professionals (please attach copies, plus copies of any additional recent assessment information)

a. Diagnosis	Year	Professional Conducting Assessment
Intellectual and adaptive function <1/3 chronological age	Jan 2013	S. Adams, Registered Psychologist
b. Functional Assessment	**Year**	**Professional Conducting Assessment**

2.

a. The student requires which of the following in the learning environment because of his/her disabilities?

X	adapted/alternate materials	X	increased supervision/assistance
X	modified instructional focus	X	medical/personal care
	adjusted instructional level		mobility/motor development
X	alternate communication		ongoing or emergency medical plan (attach copy)
	specialized facility/furniture		behaviour plan (attach copy)
	other		

b. Submit a one-page summary of school functioning.

3. Services provided in accordance with the *Funding Manual for School Authorities 2014-2015 School Year.* Identify three or more of the following supports from (a) to (e) that are being provided to the student

a. Frequent specialized one-on one intervention provided during 2014/2015

Intervention	hours per day	staff:student ratio
specialized setting with teacher	7	1:9
small group work with teacher		
teacher assistant	7	1:3
interpreter		
other		

b. Specialized equipment and/or assistive devices provided during 2014/2015:

x	communication devices		specialized furniture
	assistive technology/devices		specialized software
	personal FM system	x	specialized equipment
	other (specify)		

c. **Assistance with personal care/health-related interventions provided by school staff during 2014/2015:**

x	assistance with personal hygiene		lifts and transfers
	catheterization		respiratory therapy
	g-tube feeding		management of equipment
x	other feeding program		oxygen administration
	administration of medication		mobility training (walker, wheelchair)
	other (specify)		

d. Frequent documentation of behavioural and/or medical status during 2014/2015 through anecdotal records, checklists and/or medical logs (submit summary of behaviour status):

	Hourly	Daily	Weekly	Monthly
Behaviour is monitored				
Medical condition is monitored		x		

e. **Direct support services for the student at a cost to the system provided during 2014/2015** (note: regularly scheduled services means the service must be provided to the student **5 or more hours** per year)

	assistive technology consultant		physical therapist
	audiologist		registered psychologist
	behaviour specialist		school liaison worker
	hearing consultant		school/guidance counsellor
	itinerant teacher		social worker
	nursing services		special education consultant/lead teacher
x	occupational therapist	x	speech language pathologist
	orientation and mobility specialist		vision consultant
	other (specify)		

4. DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3a - 3e are in place, a current IPP is included in the student's file, and the student meets the 2014/2015 severe disabilities coding criteria.

Sept 28/2014 — **Date**

T. Jones — **Signature of school authority designate**

Summary of School Functioning

Student: Brandon
Grade: Ungraded **School:** Uphill High School
Date: October 4, 2014
Teacher: Ms. Jones

- Brandon is a young man who has severe developmental disabilities that affect all areas of functioning, and requires an educational program that focuses on developing greater personal independence. He enjoys contact with both peers and adults and is an enthusiastic participant in all school activities. He is in a life-skills program with other students with disabilities.

- He is ambulatory but somewhat clumsy, particularly when in a hurry. He is familiar with the school, and able to go from his classroom to the cafeteria, washroom and office with minimal supervision. Brandon tends to rush when eating, so requires supervision to ensure he chews his food properly, as well as to assist him with the use of a fork, knife and spoon. He can dress independently providing the clothing does not have difficult fasteners, but requires light physical prompting to complete washroom and grooming routines.

- Brandon uses an iPad to express his basic needs and consistently uses over 100 graphic symbols to communicate; the symbols are changed as required.

- The focus of Brandon's programming continues to emphasize developing independence, specifically, the skills he will need as an adult in a supportive living setting such as personal care, food preparation and increased community awareness. These skills will be addressed both at school and at home. The occupational therapist is observing Brandon's current functioning in these areas and will be assisting school staff and his parents in programming and selecting assistive devices.

- Prompts are being reduced from hand-over-hand and physical prompts to an increased emphasis on verbal prompts. Also Brandon is being given the opportunity to make choices between more than two options. He continues to need extensive teacher assistant support, but this is being faded wherever possible.

Severe Emotional/Behavioural Disability (Code 42)

Special Education Coding Criteria

A funded student with a severe emotional/behavioural disorder is one who:

- displays chronic, extreme and pervasive behaviours, which require close and constant adult supervision, high levels of structure, and other intensive support services in order to function in an educational setting. The behaviours significantly interfere with both the learning and safety of the student and other students. For example, the student could be dangerously aggressive and destructive (to self and/or others), violent, extremely compulsive, withdrawn, delusional, paranoid; and
- has a diagnosis such as: conduct disorder, schizophrenia, bipolar disorder, obsessive/compulsive disorders, severe chronic depressive disorder, trauma and stressor-related disorders, feeding and/or eating disorders and may display self-stimulation or self-injurious behaviour. In the most extreme and pervasive instances, severe oppositional defiant disorder may be included under this code. [2]

A clinical diagnosis of a severe emotional/behavioural disorder by a psychiatrist, registered psychologist or a developmental pediatrician is required, in addition to extensive documentation by school authorities on the nature, frequency and severity of the disorder. The effects of the disability on the student's functioning in an education setting should be described. An ongoing treatment plan/behaviour plan should be available and efforts should be made to ensure that the student has access to appropriate mental health and therapeutic services.

A clinical diagnosis of a severe emotional/behavioural disorder is not necessarily sufficient to qualify under this category. Some diagnoses with behavioural components that are not sufficient to qualify are: attention deficit/hyperactivity disorder (ADHD), attention deficit disorder (ADD).

Note: Students diagnosed with fetal alcohol spectrum disorder (FASD), in the most severe cases, should be reported under Code 44 rather than Code 42.

Questions and Answers

What documentation is required to determine students meet the severe emotional/behavioural disability coding criteria?

- Documentation in the student's file should include the following type of information:
  - a behaviour assessment report that includes a specific clinical diagnosis
  - a one page summary of functioning that describes the nature, frequency and severity of the aberrant behaviour and the impact on learning
  - behaviour/ treatment plan.
- The clinical diagnosis of a severe emotional/behavioural disability is made by a psychiatrist or registered psychologist or developmental pediatrician.

[2] American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

What type of information may be included in a behaviour assessment report?

- The type of information typically found in a behaviour assessment report includes:
  - assessment/diagnostic information that clarifies and documents history which may have precipitated the current behaviours
  - recent medical history noting any medication that modifies the student's behaviour and further assessments/follow-up appointments
  - interviews/surveys (e.g., Behaviour Assessment System for Children, Second Edition (BASC-2) or Conners Rating Scales-Revised, filled out by parents, teacher(s), and student, if appropriate), that outline the concerns with the student's behaviour
  - documentation as to the nature, frequency and severity of the specific behaviour and steps taken so far to mitigate it
  - observations and assessment results from the psychiatrist/registered psychologist making the clinical diagnosis.

How much detail does Alberta Education require in the anecdotal documentation for students with severe emotional/behavioural disabilities? What is required?

- Alberta Education needs to know the specific behaviours the student exhibits that are extreme, pervasive and impact the educational setting. For example, what does a typical week look like?
- To document this, you could prepare a chart (see example on page 18) that explains what the student's actual behaviours are and the frequency of these behaviours over a period of time.
- You may want to consider adding the time of day to the chart in order to see if the student functions better in the morning or afternoon. This will help to determine what preventative strategies you need to put into place or what changes to routines or direct teaching of social or adaptive skills would benefit the student.
- The information gathered from checklists and anecdotal notes should assist in programming for each student and serve a functional purpose.
- The information should be summarized in point form.

How can I demonstrate that the student's behaviour is severe?

- A concise summary of anecdotal notes and checklists that describe the nature, frequency and severity of the student's behaviour at the time she or he was identified by the school authority, in addition to the behaviour assessment report,
- Documentation that describes the nature, frequency and intensity of the interventions that are needed to maintain appropriate student behaviour.
- Summary of behaviours and results of school interventions required to maintain or improve appropriate behaviours.

The student's behaviour has improved significantly with all the programming supports that are in place. Will the student still meet criteria?

- The student may continue to meet the criteria, provided that appropriate behaviours are maintained only because of the level and degree of supports and programming aligned with an appropriate diagnosis. This information should be recorded in the IPP.

Should the teacher/parent communication book and/or the teacher's daily checklist be included in the package for a student?

- Communication books and daily checklists are useful for sharing information with parents and tracking behavioural incidents, but they should not be included in the funding request package.

For additional information, please refer to the case study on pages 17 to 21.

For sample IPP templates for students requiring behaviour support, please visit: http://www.learnalberta.ca/content/ieptLibrary/lib05.html.

Case Study — Harley

Background information, description of severe disabling condition(s)	• Harley is a fifteen-year-old boy in Grade 10 at Dry Creek High School. • Harley currently resides in a foster home near the school. • Harley was diagnosed as having bipolar disorder by Dr. Bunton in July 2010. • Harley is currently under the care of Dr. Panwhar, psychiatrist, who has prescribed medication to help control Harley's episodes. • Some of the features of Harley's behaviours that impact his learning at school include: – truancy – failure to complete school assignments – anxiety attacks – depression – mood swings, manic episodes (e.g., grandiose talk, agitation, withdrawal) – extreme withdrawal, no peer relations, unresponsive, constant crying – self-injurious behaviour.
Current supports/services in place	• Harley is in a regular Grade 10 program. He has a teacher assistant for three hours each day for one-on-one support. • He receives one-on-one counsellor support for one half-hour each day from the school counsellor, who also is trained in management of emotional and behavioural disorders. • A behaviour specialist and a learning coach work with the teachers and educational assistant on a monthly basis to review and revise behavioural and academic programming strategies. • The school counsellor has regular contact with Harley's psychiatrist, who also is part of Harley's support team. • Harley meets with his psychiatrist monthly. • Harley also has regular meetings with the social worker in charge of his case.

Individualized Program Plan	• Harley's IPP was developed by the learning team, in consultation with his legal guardian, psychiatrist, inclusive education consultant and social worker. • Harley's overall program focuses on helping him cope with social, emotional and academic needs. • The major behaviour management goals identified from the behaviour chart completed during September 2014 are: – teaching self-regulation strategies – increasing organizational skills and reducing off-task behaviours – learning coping skills for anxiety attacks.

Sample Behaviour Chart

NAME: Harley **MONTH:** September 2014

Date:		8	9	10	11	12	13	14	15	16	17	18	19	Frequency Tally
Attended school (weekend W attended ✓ did not attend X)		✓	✓	X	✓	✓	W	W	X	✓	✓	✓	✓	8/10
Met with counsellor (Yes ✓)		✓	✓		✓	✓					✓	✓	✓	7/10
Took medication (Yes ✓)		✓	✓		✓	✓				✓	✓	✓	✓	8/10
Attended work experience (Yes ✓)		✓	✓	✓	✓	✓				✓	✓	✓	✓	9/10
Felt anxious/restless/ agitated (Yes ✓)	am	✓	✓	✓	✓	✓			✓	✓	✓	✓	✓	10/10
	pm	✓	✓	✓	✓	✓			✓	✓	✓	✓	✓	10/10

The tallies of this chart inform the goals of Harley's IPP. For example, the high frequency of Harley's feelings of anxiety suggest that reduction in this area is a priority goal. From consultation with the counsellor, it became clear that Harley's anxiety is tied to working with peers. Therefore, it was deemed appropriate to monitor his frequency of attendance and consistency in taking his medications, which help to stabilize his mood. Further, more specific checklists would be developed to monitor each of the objectives related to Harley's long term goals.

Alberta Government

Student Monitoring Form Severe Disabilities Funding 2014/2015

New ☐ **Renewal** ☒

PLEASE CHECK CODE

- ☐ **41 Severe Cognitive**
- ☒ **42 Severe Emotional/Behavioural**
- ☐ **43 Severe Multiple**
- ☐ **44 Severe Physical or Medical**
- ☐ **45 Deafness**
- ☐ **46 Blindness**

School Authority ABC Authority

School Day Creek High School

Student Name Harley

Alberta Student Number (ASN) xxxxxxxxx

Birth date (yyyy/mm/dd) 1998/03/17 **Grade** 10

Placement (describe) grade 10 program

1. Supporting Documentation from the appropriate professionals (please attach copies, plus copies of any additional recent assessment information)

a. Diagnosis	Year	Professional Conducting Assessment
Confirm bi-polar disorder	2013	Dr. Panwhar, psychiatrist
Bi-polar disorder, ADHD	2010	Dr. Bunton, psychiatrist
b. Functional Assessment	**Year**	**Professional Conducting Assessment**

2.

a. The student requires which of the following in the learning environment because of his/her disabilities?

☐	adapted/alternate materials	☒	increased supervision/assistance
☐	modified instructional focus	☐	medical/personal care
☐	adjusted instructional level	☐	mobility/motor development
☐	alternate communication	☐	ongoing or emergency medical plan (attach copy)
☐	specialized facility/furniture	☒	behaviour plan (attach copy)
☐	other		

b. Submit a one-page summary of school functioning.

3. Services provided in accordance with the *Funding Manual for School Authorities 2014-2015 School Year.* Identify three or more of the following supports from (a) to (e) that are being provided to the student:

a. Frequent specialized one-on one intervention provided during 2014/2015:

Intervention	hours per day	staff:student ratio
specialized setting with teacher		
small group work with teacher		
teacher assistant	3	1:1
interpreter		
other		

b. Specialized equipment and/or assistive devices provided during 2014/2015:

	communication devices		specialized furniture
	assistive technology/devices	x	specialized software
	personal FM system		specialized equipment
x	other (specify) - iPhone		

c. **Assistance with personal care/health-related interventions provided by school staff during 2014/2015:**

	assistance with personal hygiene		lifts and transfers
	catheterization		respiratory therapy
	g-tube feeding		management of equipment
	other feeding program		oxygen administration
x	administration of medication		mobility training (walker, wheelchair)
	other (specify)		

d. Frequent documentation of behavioural and/or medical status during 2014/2015 through anecdotal records, checklists and/or medical logs (submit summary of behaviour status):

	Hourly	Daily	Weekly	Monthly
Behaviour is monitored		x		
Medical condition is monitored		x		

e. **Direct support services for the student at a cost to the system provided during 2014/2015** (note: regularly scheduled services means the service must be provided to the student **5 or more hours** per year)

	assistive technology consultant		physical therapist
	audiologist		registered psychologist
	behaviour specialist		school liaison worker
	hearing consultant	x	school/guidance counsellor
	itinerant teacher		social worker
	nursing services	x	special education consultant/lead teacher
	occupational therapist		speech language pathologist
	orientation and mobility specialist		vision consultant
	other (specify)		

DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3 a-3e are in place, a current IPP is included in the student's file, and the student meets the 2014/2015 severe disabilities coding criteria.

Sept 18, 2014
Date

B. Moore
Signature of school authority designate

School Summary of Behavioural Functioning and Impact
September 28, 2014

Student: Harley Edward Jones **School:** Dry Creek High School
Grade: 10 **Teacher:** Jane Glass, Counsellor

Priority presenting behaviour(s):

- During the month of September, Harley exhibited several behaviours at school which caused concern for staff.

What are the behaviours?

Describe what they look like in the educational environment

- These included being truant from school, failing to complete classroom assignments and homework, and rapid changes in mood. The most significant area of concern is the increase in the number and frequency of anxiety attacks Harley has had since school began earlier this month. Harley describes he has racing thoughts during his anxiety attacks. His teachers have observed that during his anxiety attacks, he talks excessively and that it is very difficult to follow his conversation because he moves so rapidly between topics he appears incoherent.
- He becomes so agitated that he cries in front of his classmates and then physically lashes out at them when they comment about his show of emotion. These aspects of his behaviour are of most concern because of the impact they have on his peer interactions and ability to participate in class work.

Frequency of priority behaviour(s):

Give the number of intense attacks.

Describe chronic episodes.

- Since September 4, Harley has reported that he has experienced approximately 20 intense anxiety attacks while at school. His behaviour chart indicates that he is in an almost constant state of anxiety. A review of his behaviour chart shows that he is feeling anxious, restless or agitated for almost the entire school day.
- This information was collected by Harley and collated with the assistance of the school counsellor. From September 4 to 15, he reported a total of 20 anxiety attacks, which were evenly distributed between morning and afternoon.

Impact of the priority behaviour(s):

What happens as a direct result of these behaviours?

- During five of the anxiety attacks, which occurred during two morning breaks, two morning classes and one afternoon class, Harley got into physical fights with peers. These incidents resulted in two 2-day suspensions and one 5-day suspension for fighting for both Harley and the other students. During the third incident, Harley sustained a severe blow to his head and was taken by ambulance to the local emergency room.
- After each of these incidents, Harley shared that he was "worthless" and "would not survive to finish school." He is often reported to appear sad and no longer wants to be around other students.

Plan and supports to address the priority behaviour(s):

Who is involved?

What are the supports and how do they relate to a plan?

- School staff, parents and Harley met to develop a plan to support him at school. It was decided that he would meet with the school counsellor every day for 30 minutes. As well, to build on his interest in theatrical set design, a work experience placement at the local theatre has been arranged. A teacher assistant will accompany him to his placement during the afternoons.
- The number of courses he will take each semester has been altered to accommodate this change. This plan will be reviewed in mid-November to determine if changes or alternations are required to his IPP.

Severe Multiple Disability (Code 43)

Special Education Coding Criteria

A funded student with multiple disabilities is one who:

- has two or more non-associated moderate to severe cognitive and/or physical disabilities which, in combination, result in the student functioning at a severe to profound level; and
- requires significant special programming, resources and/or therapeutic services.

Students with a severe disability and another associated disability should be identified under the category of the primary severe disability. For example:

- A student with a severe cognitive disability and another associated disability is not designated under this category, but is designated under severe cognitive disability.
- A student with a severe emotional/behavioural disability and another associated disability is not designated under this category, but is designated under severe emotional/behavioural disability.

The following mild or moderate disabilities cannot be used in combination with other disabilities to qualify under Code 43:

- attention deficit/hyperactivity disorder (ADHD)
  attention deficit disorder (ADD)
- emotional/behavioural disabilities
- learning disability (LD)
- speech and language-related delays.

Questions and Answers

What are the main characteristics of a student who meets the special education coding criteria for severe multiple disability?

A student with a severe multiple disability may exhibit two or more of the following:

- moderate cognitive disability
- severe cognitive disability
- bilateral hearing loss in the moderate to severe range; average of 56 – 70 decibels over 500 – 4000 Hz in the better ear reported by the appropriate specialist
- visual impairment that is moderate to severe (20/100 in the better eye), but not legally blind, degeneration prognosis reported by the appropriate specialist
- moderate to severe autistic-like behaviour
- moderate to severe physical disability or medical condition that interferes with learning.

What documentation is required to meet the coding criteria?

- Diagnoses by professionals for each of the two or more non-associated disabling conditions. This may include reports from registered psychologists, audiologists, ophthalmologists and medical professionals.
- Current documentation should be in the student's file.
- If a student has two or more non-associated disabilities that have not changed significantly, a current functional assessment by school authority specialists or other contracted consulting agencies may be sufficient.
- A diagnosis of each of the disabling conditions is required but not necessarily sufficient to qualify. Eligibility depends on the student's current level of functioning within the learning environment.

What other supporting documentation from a school, relevant to the student's disabling conditions and programming requirements, may be included with the student package for monitoring by Alberta Education?

- physical therapy, occupational therapy, speech-language therapy reports
- vision and/or hearing consultant reports
- current and relevant medical reports
- additional documentation, including anecdotal information, reflecting the student's needs in the learning environment.

For additional information please refer to the case study on pages 24 to 27.

For sample IPP templates please visit:
http://www.learnalberta.ca/content/ieptLibrary/lib07.html.

Case Study — Amina

Background information, description of severe disabling condition(s)	• Amina is an eight-year-old student currently in Grade 3 at Caldwell School. • Dr. Brown diagnosed Amina in 2007 as having Kabuki make-up syndrome and moderate cognitive delay. In November 2011, she was diagnosed with a moderate hearing loss by R. Dean, audiologist. • She presents with generalized low muscle tone, decreased physical strength, delays in gross and fine motor development, poor social skills and a moderate bilateral hearing loss. • The occupational therapist and physical therapist both report Amina's need for assistance with toileting, dressing, and feeding and for constant supervision, as she has a danger of falling, especially on the stairs.
Current supports/services in place	• Amina currently receives individual support 4 hours a day from a part-time teacher assistant and 30 minutes a day in a small group from a teacher assistant who is assigned to the classroom. • Amina receives small group instruction for mathematics and pro-social skills. She also receives ongoing individual assistance to maintain attention to task and to complete all tasks in the classroom environment. • Amina requires assistance with dressing and in the washroom. She receives stand-by assistance for all transitions and walking the stairs. • Amina receives individual assistance at lunch and recess times. • Amina requires an augmentative/alternative communication system and has been referred for assessment at the I Can Centre, Glenrose Rehabilitation Hospital.
Individualized Program Plan	• Amina's IPP was developed in consultation with her learning team, including her parents, the speech-language pathologist, occupational therapist, physical therapist, behaviour specialist and hearing consultant. • The goals of Amina's education program address her needs, result from the combination of disabling conditions, and are reflected in the classroom accommodations and level of supervision.

Alberta Government

Student Monitoring Form Severe Disabilities Funding 2014/2015

New ☐ Renewal ☒

PLEASE CHECK CODE

- ☐ 41 Severe Cognitive
- ☐ 42 Severe Emotional/Behavioural
- ☒ 43 Severe Multiple
- ☐ 44 Severe Physical or Medical
- ☐ 45 Deafness
- ☐ 46 Blindness

School Authority ABC Authority

School Caldwell School

Student Name Amina

Alberta Student Number (ASN) xxxxxxxxx

Birth date (yyyy/mm/dd) 2005/08/30 **Grade** 3

Placement (describe) grade 3 classroom

1. **Supporting Documentation from the appropriate professionals (please attach copies, plus copies of any additional recent assessment information)**

a. Diagnosis	Year	Professional Conducting Assessment
Kabuki make-up syndrome	2006	Dr. Brown, physician
Moderate cognitive delay		
Moderate bi-lateral hearing loss	2009	R. Dean, audiologist
b. Functional Assessment	**Year**	**Professional Conducting Assessment**
Communication review	2014	Speech-Language Pathologist

2.
   a. **The student requires which of the following in the learning environment because of his/her disabilities?**

x	adapted/alternate materials	x	increased supervision/assistance
x	modified instructional focus		medical/personal care
	adjusted instructional level		mobility/motor development
	alternate communication	x	ongoing or emergency medical plan (attach copy)
	specialized facility/furniture		behaviour plan (attach copy)
	other		

   b. **Submit a one-page summary of school functioning.**

3. **Services provided in accordance with the *Funding Manual for School Authorities 2014-2015 School Year.* Identify three or more of the following supports from (a) to (e) that are being provided to the student**

   a. **Frequent specialized one-on one intervention provided during 2014/2015:**

Intervention	hours per day	staff:student ratio
specialized setting with teacher		
small group work with teacher	0.5	1:4
teacher assistant	4.5	1:1
interpreter		
other		

b. Specialized equipment and/or assistive devices provided during 2014/2015:

	communication devices		specialized furniture
	assistive technology/devices		specialized software
x	personal FM system		specialized equipment
	other (specify)		

c. Assistance with personal care/health-related interventions provided by school staff during 2014/2015:

x	assistance with personal hygiene		lifts and transfers
	catheterization	x	respiratory therapy
	g-tube feeding	x	management of equipment
x	other feeding program		oxygen administration
	administration of medication		mobility training (walker, wheelchair)
	other (specify)		

d. Frequent documentation of behavioural and/or medical status during 2014/2015 through anecdotal records, checklists and/or medical logs (submit summary of behaviour status):

	Hourly	Daily	Weekly	Monthly
Behaviour is monitored				
Medical condition is monitored		x		

e. Direct support services for the student at a cost to the system provided during 2014/2015 (note: regularly scheduled services means the service must be provided to the student **5 or more hours** per year)

	assistive technology consultant		physical therapist
	audiologist		registered psychologist
	behaviour specialist		school liaison worker
	hearing consultant		school/guidance counsellor
	itinerant teacher		social worker
	nursing services	x	special education consultant/lead teacher
x	occupational therapist	x	speech language pathologist
	orientation and mobility specialist		vision consultant
	other (specify)		

4. DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3a - 3e are in place, a current IPP is included in the student's file, and the student meets the 2014/2015 severe disabilities coding criteria.

Sept 25, 2014	*M. Thompson*
Date	**Signature of school authority designate**

Summary of School Functioning

Student: Amina **Date:** September 23, 2014
Grade: 3 **School:** Caldwell School **Teacher:** Ms. Major

- Amina has been diagnosed with Kabuki syndrome, a rare genetic condition which affects several parts of the body as well as cognitive functioning. Amina also has a moderate bilateral hearing disability.

- Amina has delays in both fine and gross motor development, low muscle tone and decreased strength. She frequently loses her balance and may fall. She must be supervised when using stairs. This limits her participation in physical education and other activities, and in addition to increased supervision may require alternative activities. She also tires easily. The occupational therapist has referred Amina to the seating clinic for assessment and input on the desirability of the purchase of a power scooter for activities that require extended walking.

- Her cognitive and academic skills are roughly at a pre-kindergarten level. She requires individual assistance to maintain attention to task and to complete the work assigned. Amina needs assistance with dressing, personal hygiene and other self-help skills, although she has recently become independent in eating and drinking. Amina is interested in learning to read and use numbers.

- She is happiest around adults and older children. Although she is shy with peers, she is participating in more experiences with age peers both at school and in the community. Amina has a desire to please and cooperates well with school staff.

- We are focusing on maximizing Amina's residual hearing, both through amplification (hearing aids and FM systems) and through auditory training exercises. The teacher assistant is working with Amina on an articulation and social language program developed by the speech therapist. Her speech is difficult for most people to understand. As her communication skills increase, peer relationships should also improve. Augmentative or alternate communication systems are also being explored at this time.

Severe Physical or Medical Disability (Code 44)

Special Education Coding Criteria

A funded student with a severe physical, medical or neurological disability is one who:

a) has a medical diagnosis of a physical disability, specific neurological disorder or medical condition which creates a significant impact on the student's ability to function in the school environment. (Note: some physical or medical disabilities have little or no impact upon the student's ability to function in the school environment); and

b) requires extensive adult assistance and modifications to the education environment in order to benefit from schooling.

A student with severe autism spectrum disorder (or other severe pervasive developmental disorder) may be included in this category. A clinical diagnosis by a psychiatrist, registered psychologist, or medical professional specializing in the field of autism spectrum disorder (ASD) is required. However, a clinical diagnosis alone is not necessarily sufficient to qualify under this category. Eligibility is determined by the functioning level of the student with ASD as well as their ability to function within an educational setting. Students who meet criteria for this code would require extensive intervention and support within the learning environment.

In order for a diagnosis of ASD to be made, the student needs to demonstrate impairment in the following areas:

- social interaction and communication
- exhibit stereotyped pattern of behaviour (e.g., hand flapping, body rocking, echolalia, insistence on sameness and resistance to change)
- symptoms must be present in the early developmental period
- symptoms cause clinically significant impairment in social, occupational, or other important areas of current functioning
- disturbances are not better explained by intellectual disability [3]

A student diagnosed with severe fetal alcohol spectrum disorder (FASD) may have fetal alcohol syndrome (FAS) or alcohol-related neurodevelopmental disorder (ARND) and is included in this category. A clinical diagnosis by a psychiatrist, registered psychologist with specialized training, or medical professional specializing in developmental disorders is required. A clinical diagnosis of FASD is not necessarily sufficient to qualify under this category. Assignment of this code is determined by the functioning level of the student. Students with severe FASD who exhibit significant impairment in the areas of social functioning, life skills, behaviour, learning, attention and concentration will require extensive intervention and support.

[3] American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

Questions and Answers

What documentation is required to determine a student meets the special education coding criteria for severe physical or medical disability?

- A medical diagnosis of a physical, medical or neurological disability dated within the last three to five years.
- Once it is established by the school authority that the student has a chronic disability that has not changed significantly, a current functional assessment that demonstrates the impact of the student's disability while at school may be sufficient.

What are some examples of severe medical or physical disabilities?

Documentation for students who are diagnosed with the following may meet the criteria for Code 44, depending upon the severity of the impact in the educational setting:

- tourette syndrome
- cerebral palsy
- fetal alcohol spectrum disorder
- autism spectrum disorder
- brain injury
- cancer.

What documentation is required to confirm a severe autism spectrum disorder?

- A clinical diagnosis by a psychiatrist, registered psychologist, or medical professional specializing in the field of autism spectrum disorder.
- A functional assessment and anecdotal information that documents such aspects of the instructional environment as setting, instructional context and interpersonal factors that may affect the student's performance, as well as the strengths and needs of the individual student. Individuals with autism spectrum disorder may demonstrate difficulties with:
  - processing verbal and abstract information
  - regulating attention
  - generalizing
  - motor planning
  - transitioning between activities, settings and individuals
  - accommodating some forms of sensory experience
  - organizing and self-regulating.

What documentation is required to confirm a severe fetal alcohol spectrum disorder?

- A clinical diagnosis by a medical professional or diagnostic medical team specializing in the field of fetal alcohol spectrum disorders.
- A functional assessment and anecdotal information that documents such aspects of the instructional environment as setting, instructional context and interpersonal factors that may affect the student's performance, as well as the strengths and needs of the individual student. Individuals with fetal alcohol spectrum disorder may demonstrate difficulties with:
  - academic learning
  - memory in the areas of short term recall and long term retrieval of information and directions
  - language such as interpreting figurative language and social situations, and producing complex sentence structures in speech and written language
  - developing complex, abstract thinking and reasoning
  - maintaining appropriate attention and focus
  - adaptive skills and social emotional functioning, which are delayed relative to chronological age peers.

What other supporting documentation relevant to the student's disabling condition and programming requirements may be included with the student package for monitoring by Alberta Education?

Relevant cognitive assessment reports, speech-language therapy reports, occupational therapy reports, physical therapy reports, behavioural assessment reports or medical reports.

For additional information, please refer to the case study on pages 31 to 34.

For sample IPP templates please visit:
http://www.learnalberta.ca/content/ieptLibrary/lib07.html.

Case Study — Cheng

Background information, description of severe disabling condition(s)	• Cheng is a twelve-year-old student in Grade 6. • Dr. Gold, psychiatrist, ABS Hospital, diagnosed Cheng with severe autistic disorder in November 2003. • Cheng has extreme difficulties with: – social interaction and with peers – expressive/receptive communication • Cheng exhibits stereotypic behaviours, specifically hand-flapping and pulling his hair. He is easily upset when not prepared for changes in routine/transitions. • Cheng uses some picture communication symbols to enhance communication (expressive and receptive). • Cheng requires assistance to develop more appropriate social interactions with peers and adults.
Current supports/services in place	• Cheng receives support for language arts and math, in a small group work setting (with 2 other students) for 2 hours daily. • Cheng's teacher has 5 hours of Educational Assistant/Teacher Assistant support for the development of academics in the classroom setting. • teacher assistant supervision is provided before school and during recess and lunch. • Cheng's learning team monitors and records his behaviours daily, which include: – initiated social interactions – use of oral communication and communication board – temper outbursts – obsessive-compulsive behaviours. • Inclusive Education consultants provide on-going behavior and communication consultative support. • Cheng's teachers and staff meet bi-monthly with his parents and home support worker to review his program.
Individualized Program Plan	• Cheng's IPP was developed with his learning team, including his parents, inclusive education consultants and school staff. • His IPP reflects Cheng's need for routine and identifies goals for communication, social/behaviour and academic progress.

Alberta Government

Student Monitoring Form Severe Disabilities Funding 2014/2015

New ☐ Renewal ☒

PLEASE CHECK CODE

- ☐ 41 Severe Cognitive
- ☐ 42 Severe Emotional/Behavioural
- ☐ 43 Severe Multiple
- ☒ 44 Severe Physical or Medical
- ☐ 45 Deafness
- ☐ 46 Blindness

School Authority GHI Authority

School Valley School

Student Name Cheng

Alberta Student Number (ASN) xxxxxxxxx

Birth date (yyyy/mm/dd) 2002/12/16 **Grade** 6

Placement (describe) Grade 6 class

1. Supporting Documentation from the appropriate professionals (please attach copies, plus copies of any additional recent assessment information)

a. Diagnosis	Year	Professional Conducting Assessment
Autistic disorder	2003	Dr. Gold, pediatrician
b. Functional Assessment	**Year**	**Professional Conducting Assessment**
Delayed development, communication and socialization difficulty	2013	Dr. Justina, psychologist
Academic achievement – delayed	2012	Resource teacher

2.

a. The student requires which of the following in the learning environment because of his/her disabilities?

- ☒ adapted/alternate materials
- ☐ modified instructional focus
- ☒ adjusted instructional level
- ☐ alternate communication
- ☐ specialized facility/furniture
- ☐ other
- ☐ increased supervision/assistance
- ☐ medical/personal care
- ☐ mobility/motor development
- ☐ ongoing or emergency medical plan (attach copy)
- ☒ behaviour plan (attach copy)

b. Submit a one-page summary of school functioning.

3. Services provided in accordance with the *Funding Manual for School Authorities 2014-2015 School Year.* Identify three or more of the following supports from (a) to (e) that are being provided to the student

a. Frequent specialized one-on one intervention provided during 2014/2015

Intervention	hours per day	staff: student ratio
specialized setting with teacher		
small group work with teacher	2	1:3
teacher assistant	3	1:1
interpreter		
other		

b. Specialized equipment and/or assistive devices provided during 2014/2015:

- [x] communication devices
- [ ] assistive technology/devices
- [ ] personal FM system
- [ ] other (specify)
- [ ] specialized furniture
- [ ] specialized software
- [ ] specialized equipment

c. **Assistance with personal care/health-related interventions provided by school staff during 2014/2015:**

- [ ] assistance with personal hygiene
- [ ] catheterization
- [ ] g-tube feeding
- [ ] other feeding program
- [ ] administration of medication
- [ ] other (specify)
- [ ] lifts and transfers
- [ ] respiratory therapy
- [ ] management of equipment
- [ ] oxygen administration
- [ ] mobility training (walker, wheelchair)

d. Frequent documentation of behavioural and/or medical status during 2014/2015 through anecdotal records, checklists and/or medical logs (submit summary of behaviour status):

	Hourly	Daily	Weekly	Monthly
Behaviour is monitored		x		
Medical condition is monitored				

e. **Direct support services for the student at a cost to the system provided during 2014/2015** (note: regularly scheduled services means the service must be provided to the student **5 or more hours** per year)

- [ ] assistive technology consultant
- [ ] audiologist
- [x] behaviour specialist
- [ ] hearing consultant
- [ ] itinerant teacher
- [ ] nursing services
- [ ] occupational therapist
- [ ] orientation and mobility specialist
- [ ] other (specify)
- [ ] physical therapist
- [ ] registered psychologist
- [ ] school liaison worker
- [ ] school/guidance counsellor
- [ ] social worker
- [ ] special education consultant/lead teacher
- [x] speech language pathologist
- [ ] vision consultant

4. DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3a - 3e are in place, a current IPP is included in the student's file, and the student meets the 2014/2015 severe disabilities coding criteria.

Oct 5, 2014
Date

Ms. Principal
Signature of school authority designate

Summary of School Functioning

Student: Cheng **Date:** October 1, 2014
Grade: 6 **School:** Valley School **Teacher:** P. O'Grady

Cheng exhibits many characteristics which make it challenging to succeed in the classroom:

- He prefers to work and play alone, and never initiates activities with others. Although he usually responds when others initiate, he does not appear to understand group social behaviours such as taking turns.
- He does not seem to understand others' feelings and cannot read facial expressions. Even when talking directly to a person, he shows little eye contact. He does not understand jokes or idioms.
- Recreation is repetitive rather than creative. Cheng likes to rearrange things in a precise pattern, and gets anxious if the pattern is disrupted by someone.
- Any change to routine creates anxiety, as do transitions. Staff tries to prepare Cheng for any changes to routine, but it is not always possible. When he becomes anxious, Cheng starts to flap his hands and/or pull at his hair gently at first but then more vigorously. He has learned some calming techniques, and will use them about 30 percent of the time when cued by a staff member. Cheng is starting to use his portable schedule to support him in transitioning between activities throughout the school.
- If no intervention occurs, this behaviour escalates into a tantrum where he screams and stamps his feet, and may lash out at those around him. The frequency of tantrums has diminished significantly over the past three years, but continues to occur at least once a week. He is removed from the classroom so that his behaviour does not interfere with the learning of others, since his tantrums take up to an hour to defuse to the point where Cheng is able to return to classroom.
- Cheng uses both a communication board and some speech to communicate. Speech is difficult to understand as it is somewhat robotic with abnormal pitch and intonation, and frequently too loud for the situation. He is able to use the classroom computer reading program and to write brief passages. The possibility of a personal laptop computer for his transition to junior high school is being explored.
- Cheng likes and is preoccupied with science fiction movies, watching his favorites again and again.

Deafness (Code 45)

Special Education Coding Criteria

A funded student with a severe to profound hearing loss is one who:

a) has a hearing loss of 71 decibels (dB) or more unaided in the better ear over the normal speech range (500 to 4000 Hz) which interferes with the use of oral language as the primary form of communication, or has a cochlear implant preceded by a 71 dB hearing loss unaided in the better ear; and [4]

b) requires extensive modifications and specialized educational supports; and

c) has a diagnosis by a clinical or educational audiologist. New approvals require an audiogram within the past 3 years.

If a student has a severe to profound sensorineural hearing loss that has not changed significantly since the initial approval by Alberta Education, documentation from a qualified specialist in the field of deafness outlining the severity of the hearing loss and modifications to the learning environment may be sufficient to support eligibility.

Questions and Answers

What are the main characteristics of a student with a severe to profound hearing loss?

- Hearing loss of 71 dB or more unaided in the better ear over the normal speech range on an audiogram.
- The primary form of communication may be an oral approach and/or sign language (e.g., Signed Exact English and/or American Sign Language).
- Requires extensive modifications and specialized educational supports.

What documentation is required for eligibility?

- An audiogram from an audiologist must be in the student's file. If a student has a severe to profound hearing loss that has not changed significantly, an updated audiogram is not necessary.
- A recent functional assessment from personnel specializing in the field of deaf and hard of hearing may be sufficient for programming purposes. A functional assessment report specifies the amount and type of personal assistance, specialized programming, and equipment and/or communication access required by the student.

[4] Canadian Academy of Audiology. Retrieved in 2014 from: http://www.canadianaudiology.ca/consumer/degree-of-hearing-loss.html.

- Hearing level classification equivalents: [5]

Descriptor	Decibel (dB) range (how loud a sound must be in order to be heard)
Normal hearing for children	0-15 dB
Minimal loss	16-25 dB
Mild loss	26-40 dB
Moderate loss	41-55 dB
Moderate-severe loss	56-70 dB
Severe loss	71-90 dB
Profound loss	90 + dB

What other supporting documentation relevant to the student's disabling condition and programming requirements may be included with the student package?

- Additional reports from hearing specialists, speech-language therapists, or other professionals working with the student
- Current relevant medical reports
- Any documentation, including anecdotal records, reflecting the student's needs in the learning environment.

For additional information, please refer to the case study on pages 37 to 40.

For sample IPP templates please visit:
http://www.learnalberta.ca/content/ieptLibrary/lib07.html.

For additional instructional strategies for students who are deaf or hard of hearing, please visit:

Minerva Deaf Research Lab (MDRL): http://mdrl.educ.ualberta.ca/

Inclusive Education Library, Medical/Disability Information for Classroom Teachers, Hearing Loss: http://www.learnalberta.ca/content/inmdict/html/hearing_loss.html

[5] Canadian Academy of Audiology. Retrieved in 2014 from: http://www.canadianaudiology.ca/consumer/degree-of-hearing-loss.html.

Case Study — Lukina

Background information, description of severe disabling condition(s)	• Lukina is a nine-year-old girl in a Grade 4 classroom. • Lukina has a congenital severe sloping to profound, binaural (involving both ears) sensorineural hearing loss, diagnosed at age 16 months by Rob Ring, audiologist, in September 2005. There has been no significant change in Lukina's hearing. • Shortly after diagnosis, Lukina began speech therapy. It was discontinued at the end of last school year. • Beginning when she was about 3 years old, Lukina attended a preschool designated for children with hearing loss. Her parents choose an oral/aural approach in combination with sign language as the mode of communication. • Lukina's articulation is difficult to understand but intelligible to those who know her. • Assessments by S. Town, hearing consultant, confirming academic, language and sign language skills delays. She provided programming recommendations in May 2013. • Lukina continues to use a combination of oral and sign language as her primary mode of communication at home and at school.
Current supports/services in place	• Lukina's teacher has access to an educational audiologist and education consultant for deaf and hard of hearing to support Lukina's educational programming. • The consultant for deaf and hard of hearing supports Lukina in her school program and assists the teacher and other staff in the development and implementation of her IPP. • Lukina's learning environment and presentation of materials are modified and/or adapted to address her communication and academic needs. • Lukina is supported throughout the day by a qualified sign language interpreter, including recess and lunch breaks. • Lukina has access to a computer for additional literacy/communication support.
Individualized Program Plan	• Lukina's IPP was developed with the learning team, which consists of her parents, teacher(s), consultant for deaf and hard of hearing, and school administrator. • Measurable goals are identified to address Lukina's language, communication, literacy and social/emotional needs. The IPP identifies assessment data, current level of performance and achievement, her strengths, needs, procedures for evaluating student progress, coordinated supports, teaching/classroom adaptations including additional program supports, transition plans and year-end summary

Alberta Government

Student Monitoring Form Severe Disabilities Funding 2014/2015

New ☒ Renewal ☐

PLEASE CHECK CODE	
	41 Severe Cognitive
	42 Severe Emotional/Behavioural
	43 Severe Multiple
	44 Severe Physical or Medical
x	45 Deafness
	46 Blindness

School Authority Vista Authority

School South School

Student Name Lukina

Alberta Student Number (ASN) xxxxxxxxx

Birth date (yyyy/mm/dd) 2005/05/23 **Grade** 4

Placement (describe) Grade 4 class

1. Supporting Documentation from the appropriate professionals (please attach copies, plus copies of any additional recent assessment information)

a. Diagnosis	Year	Professional Conducting Assessment
Congenital severe sloping to profound binaural	2006	Rob Ring, audiologist
b. Functional Assessment	**Year**	**Professional Conducting Assessment**
Confirm loss, hearing functioning	2013	S. Town, hearing consultant

2.

a. The student requires which of the following in the learning environment because of his/her disabilities?

	adapted/alternate materials	x	increased supervision/assistance
	modified instructional focus		medical/personal care
x	adjusted instructional level		mobility/motor development
x	alternate communication		ongoing or emergency medical plan (attach copy)
	specialized facility/furniture		behaviour plan (attach copy)
	other		

b. Submit a one-page summary of school functioning.

3. Services provided in accordance with the *Funding Manual for School Authorities 2014-2015 School Year.* Identify three or more of the following supports from (a) to (e) that are being provided to the student

a. Frequent specialized one-on one intervention provided during 2014/2015:

Intervention	hours per day	staff:student ratio
specialized setting with teacher		
small group work with teacher	1	1:4
teacher assistant		
interpreter	6	1:1
other		

b. Specialized equipment and/or assistive devices provided during 2014/2015:

- [ ] communication devices
- [ ] assistive technology/devices
- [x] personal FM system
- [ ] other (specify)
- [ ] specialized furniture
- [x] specialized software
- [ ] specialized equipment

c. **Assistance with personal care/health-related interventions provided by school staff during 2014/2015:**

- [ ] assistance with personal hygiene
- [ ] catheterization
- [ ] g-tube feeding
- [ ] other feeding program
- [ ] administration of medication
- [ ] other (specify)
- [ ] lifts and transfers
- [ ] respiratory therapy
- [ ] management of equipment
- [ ] oxygen administration
- [ ] mobility training (walker, wheelchair)

d. Frequent documentation of behavioural and/or medical status during 2014/2015 through anecdotal records, checklists and/or medical logs (submit summary of behaviour status):

	Hourly	Daily	Weekly	Monthly
Behaviour is monitored				
Medical condition is monitored				

e. **Direct support services for the student at a cost to the system provided during 2014/2015** (note: regularly scheduled services means the service must be provided to the student **5 or more hours** per year)

- [ ] assistive technology consultant
- [x] audiologist
- [ ] behaviour specialist
- [x] hearing consultant
- [ ] itinerant teacher
- [ ] nursing services
- [ ] occupational therapist
- [ ] orientation and mobility specialist
- [ ] other (specify)
- [ ] physical therapist
- [ ] registered psychologist
- [ ] school liaison worker
- [x] school/guidance counsellor
- [ ] social worker
- [x] special education consultant/lead teacher
- [ ] speech language pathologist
- [ ] vision consultant

4. DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3a - 3e are in place, a current IPP is included in the student's file, and the student meets the 2014/2015 severe disabilities coding criteria.

Sept 28, 2014
Date

M. Simpson
Signature of school authority designate

Summary of School Functioning

Student: Lukina **Date:** October 8, 2014
Grade: 4 **School:** South School **Teacher:** A. Parsons

- Lukina has a congenital severe sloping to profound binaural (involving both ears) sensory neural hearing loss. There has been no significant change in her hearing since infancy. She participated in speech therapy for 7 years, but it was discontinued at the end of the last school year. Lukina's articulation is difficult to understand but intelligible to those who know her well. She uses a combination of oral and sign language as her primary mode of communication at home and at school, and uses a personal FM system. Lukina is supported in the classroom and during recess and lunch breaks by a qualified sign language interpreter.

- Lukina is a friendly and outgoing child who enjoys playing sports and hands-on activities. She is willing to try new things. She is performing at grade level in mathematics but needs to develop English literacy skills, sign language vocabulary and keyboarding skills to increase her academic and communication skills. The majority of Lukina's individualized language arts instruction and assignments are done on the computer, with the use of specialized software.

- Lukina tends to be distractible. Since virtually all of Lukina's information is gained through visual means, it is important to increase her ability to focus her attention. Her seating has been adjusted to ensure a clear line of vision to the speaker and/or interpreter. She is given prompts when her attention waivers either during a presentation or during independent assignments.

- As she is fully included in a grade 4 class, the specialists are recommending the parents access opportunities for Lukina to interact with other signing deaf students, as communicating through an interpreter tends to reduce spontaneous social communication.

Blindness (Code 46)

Special Education Coding Criteria

A funded student with severe vision impairment is one who:

a) has corrected vision so limited that it is inadequate for most or all instructional situations, and information must be presented through other means; and

b) has visual acuity ranging from 6/60 (20/200) in the better eye after correction, to having no usable vision or field of vision reduced to an angle of 20 degrees.

If a student has a severe to profound visual impairment that has not changed significantly since the initial approval by Alberta Education, documentation from a qualified specialist in the field of vision outlining the severity of the disability and modifications to the learning environment may be sufficient to support eligibility.

For those students who may be difficult to assess (e.g., cortical blindness – developmentally delayed), a functional visual assessment by a qualified specialist in the field of vision or a medical professional may be sufficient to support eligibility.

Questions and Answers

What are the main characteristics of a student with a severe visual disability?

- In order to participate fully within the educational environment, students who are blind or visually impaired require instruction in disability-specific skills. These can include:
  - compensatory academic skills, including braille or alternate format materials such as large print or audio tape
  - orientation and mobility
  - social interaction skills
  - assistive technology such as screen readers
  - independent living or personal management skills
  - visual efficiency skills
  - recreation, leisure, career and life management skills.

What documentation is required for eligibility?

- Reports or results from a medical doctor, ophthalmologist, specialized teachers or other medical professionals specializing in the field, which document the severity of the disability, must be in the student's file.

What other supporting documentation relevant to the student's disabling condition and programming requirements may be included with the student package for monitoring by Alberta Education?

- Additional reports from specialized teachers, orientation and mobility specialists or other professionals working with the student
- Current relevant medical reports
- Any documentation, including anecdotal information, which reflects the student's needs in the learning environment.

For additional information, please refer to the case study on pages 43 to 46.

For sample IPP templates please visit:
http://www.learnalberta.ca/content/ieptLibrary/lib07.html.

For additional instructional strategies for students who are blind, please visit:

Vision Education Alberta: http://www.vision.alberta.ca/

Inclusive Education Library, Medical/Disability Information for Classroom Teachers, Blindness: http://www.learnalberta.ca/content/inmdict/html/blindness.html

Case Study — Shannon

Background information, description of severe disabling condition(s)	• Shannon is a nine-year-old Grade 4 student. • She was diagnosed at age 2 in June 2006, with ocular albinism and nystagmus (involuntary movement of the eyes) by Dr. Lee, ophthalmologist. • Visual acuity was recorded at that time as 6/60 in each eye. This is consistent with the definition of legal blindness. • Shannon is of above average intelligence. • An updated functional assessment in March 2014 by Kate Sloan, vision consultant, includes programming recommendations.
Current supports/services in place	• Consultation services for the visually impaired are provided on a bi-monthly basis. • Shannon is provided with braille and tactile modifications, preferred seating and the use of assistive technology that includes magnification devices. • Shannon receives orientation and mobility instruction bi-monthly from a qualified orientation and mobility instructor. • Shannon is supported by a full-time teacher assistant whose primary responsibilities include: – ensuring that all visual materials presented within the classroom environment are available to Shannon in an alternate format – providing one-to-one assistance in the follow-up of braille instruction, including Nemeth code – providing follow-up and support for orientation and mobility needs – providing support in the use of assistive technology.
Individualized Program Plan	• Shannon's IPP was developed in consultation with her learning team, which includes Shannon, her mother, teacher, vision consultant, orientation and mobility specialist, and teacher assistant. • The goals of her educational program reflect her needs for the development of specialized skills, including braille, orientation and mobility, and the use of assistive technology. • Shannon's program goals also reflect the need for her to learn skills in the areas of personal grooming and care, social interaction and recreation. • Shannon's primary medium for reading is braille, because of fatigue factors associated with print reading.

Alberta Government

Student Monitoring Form Severe Disabilities Funding 2014/2015

New ☐ **Renewal** ☒

PLEASE CHECK CODE	
	41 Severe Cognitive
	42 Severe Emotional/Behavioural
	43 Severe Multiple
	44 Severe Physical or Medical
	45 Deafness
x	46 Blindness

School Authority XYZ Authority

School Battner School

Student Name Shannon

Alberta Student Number ASN) xxxxxxxxx

Birth date (yyyy/mm/dd) 2004/06/30 **Grade** 4

Placement (describe) Grade 4 classroom

1. **Supporting Documentation from the appropriate professionals (please attach copies, plus copies of any additional recent assessment information)**

a. Diagnosis	Year	Professional Conducting Assessment
Ocular albinism; visual acuity 6/60 in both eyes after correction; nystagmus	2006	Dr. Lee, Ophthalmologist
b. Functional Assessment	**Year**	**Professional Conducting Assessment**
Functional vision assessment	2012	K. Sloane, vision consultant

2.
   a. **The student requires which of the following in the learning environment because of his/her disabilities?**

x	adapted/alternate materials	x	increased supervision/assistance
	modified instructional focus		medical/personal care
	adjusted instructional level	x	mobility/motor development (O&M training)
x	alternate communication		ongoing or emergency medical plan (attach copy)
x	specialized facility/furniture		behaviour plan (attach copy)
	other		

   b. **Submit a one-page summary of school functioning.**

3. **Services provided in accordance with the *Funding Manual for School Authorities 2014-2015 School Year.* Identify three or more of the following supports from (a) to (e) that are being provided to the student:**

a. Frequent specialized one-on one intervention provided during 2014/2015:

Intervention	hours per day	staff:student ratio
specialized setting with teacher		
small group work with teacher		
teacher assistant	6	1:1
interpreter		
other – Braille instruction (8 hrs/month)	0.4	1:1

b. Specialized equipment and/or assistive devices provided during 2014/2015:

- [ ] communication devices
- [x] assistive technology/devices
- [ ] personal FM system
- [ ] other (specify) – large print, white cane
- [x] specialized furniture
- [ ] specialized software
- [x] specialized equipment (brailler, magnifiers)

c. **Assistance with personal care/health-related interventions provided by school staff during 2014/2015:**

- [ ] assistance with personal hygiene
- [ ] catheterization
- [ ] g-tube feeding
- [ ] other feeding program
- [ ] administration of medication
- [ ] other (specify)
- [ ] lifts and transfers
- [ ] respiratory therapy
- [ ] management of equipment
- [ ] oxygen administration
- [ ] mobility training (walker, wheelchair)

d. Frequent documentation of behavioural and/or medical status during 2014/2015 through anecdotal records, checklists and/or medical logs (submit summary of behaviour status):

	Hourly	Daily	Weekly	Monthly
Behaviour is monitored				
Medical condition is monitored				

e. **Direct support services for the student at a cost to the system provided during 2014/2015** (note: regularly scheduled services means the service must be provided to the student **5 or more hours** per year)

- [ ] assistive technology consultant
- [ ] audiologist
- [ ] behaviour specialist
- [ ] hearing consultant
- [ ] itinerant teacher
- [ ] nursing services
- [ ] occupational therapist
- [x] orientation and mobility specialist
- [ ] other (specify)
- [ ] physical therapist
- [ ] registered psychologist
- [ ] school liaison worker
- [ ] school/guidance counsellor
- [ ] social worker
- [ ] special education consultant/lead teacher
- [ ] speech language pathologist
- [x] vision consultant

4. DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3a - 3e are in place, a current IPP is included in the student's file, and the student meets the 2014/2015 severe disabilities coding criteria.

October 1, 2014 — **Date**

L. Clark — **Signature of school authority designate**

Summary of School Functioning

Student: Shannon **Date:** October 4, 2014
Grade: 4 **School:** Battner School **Teacher:** Mrs. Jones

- Shannon is a bright nine year old who is legally blind. She was diagnosed at age 2 with ocular albinism and nystagmus (involuntary eye movements).

- Shannon is functioning at or slightly below grade level, but requires significant supports to do so. She is provided with braille and tactile modifications, preferred seating and the use of assistive technology that includes magnification devices. She is supported by a full-time teacher assistant who ensures that all visual materials presented within the classroom are available to Shannon in an alternate format.

- In addition to regular programming, Shannon requires instruction in specialized skills for the visually impaired. She receives orientation and mobility instruction twice a month from a qualified instructor, with ongoing follow-up and support provided by the teacher assistant. By the end of the school year, it is expected that Shannon will be able to travel independently, safely and efficiently anywhere within the school building. Shannon also receives instruction in braille including the Nemeth code for mathematical and scientific notation from the consultant for the visually impaired twice a month. The teacher assistant provides individualized ongoing support for braille instruction, as well as helping Shannon gain independence in the use of assistive technology (including brailler, braille printer, computer, printer, CCTV, monocular, desk magnifier). Because the use of magnified print is tiring, braille use will increase as Shannon progresses through school.

- Shannon's blindness also impacts upon other areas of functioning including personal grooming, social skills and leisure and recreational skills. These are currently being addressed on an informal, as needed basis rather than through formal instruction.

Section 3 — Appendices

Appendix A: Student Monitoring Form Severe Disabilities

Appendix B: Sample Chart for Recording Anecdotal Information – Code 42

Appendix C: Sample Individual Behaviour Support Plan

Appendix D: Answers to Commonly Asked Questions

Appendix E: Glossary

Appendix F: Resources

Alberta Government

Student Monitoring Form Severe Disabilities Funding 2014/2015

New ☐ Renewal ☐

PLEASE CHECK CODE

- ☐ 41 Severe Cognitive
- ☐ 42 Severe Emotional/Behavioural
- ☐ 43 Severe Multiple
- ☐ 44 Severe Physical or Medical
- ☐ 45 Deafness
- ☐ 46 Blindness

School Authority _____

School _____

Student Name _____

Alberta Student Number (ASN) _____

Birth date (yyyy/mm/dd) _____ Grade _____

Placement (describe) _____

1. **Supporting Documentation from the appropriate professionals (please attach copies, plus copies of any additional recent assessment information)**

a. Diagnosis	Year	Professional Conducting Assessment
b. Functional Assessment	**Year**	**Professional Conducting Assessment**

2. a. **The student requires which of the following in the learning environment because of his/her disabilities?**

- ☐ adapted/alternate materials
- ☐ modified instructional focus
- ☐ adjusted instructional level
- ☐ alternate communication
- ☐ specialized facility/furniture
- ☐ other
- ☐ increased supervision/assistance
- ☐ medical/personal care
- ☐ mobility/motor development (O&M training)
- ☐ ongoing or emergency medical plan (attach copy)
- ☐ behaviour plan (attach copy)

b. **Submit a one-page summary of school functioning.**

3. **Services provided in accordance with the *Funding Manual for School Authorities 2014-2015 School Year.* Identify three or more of the following supports from (a) to (e) that are being provided to the student**

a. **Frequent specialized one-on one intervention provided during 2014/2015:**

Intervention	hours per day	staff:student ratio

b. Specialized equipment and/or assistive devices provided during 2014/2015:

- ☐ communication devices
- ☐ assistive technology/devices
- ☐ personal FM system
- ☐ other (specify) – large print, white cane
- ☐ specialized furniture
- ☐ specialized software
- ☐ specialized equipment (brailler, magnifiers)

c. Assistance with personal care/health-related interventions provided by school staff during 2014/2015:

- ☐ assistance with personal hygiene
- ☐ catheterization
- ☐ g-tube feeding
- ☐ other feeding program
- ☐ administration of medication
- ☐ other (specify)
- ☐ lifts and transfers
- ☐ respiratory therapy
- ☐ management of equipment
- ☐ oxygen administration
- ☐ mobility training (walker, wheelchair)

d. **Frequent documentation of behavioural and/or medical status during 2014/2015 through anecdotal records, checklists and/or medical logs (submit summary of behaviour status):**

	Hourly	Daily	Weekly	Monthly

e. **Direct support services for the student at a cost to the system provided during 2014/2015** (note: regularly scheduled services means the service must be provided to the student **5 or more hours** per year)

- ☐ assistive technology consultant
- ☐ audiologist
- ☐ behaviour specialist
- ☐ hearing consultant
- ☐ itinerant teacher
- ☐ nursing services
- ☐ occupational therapist
- ☐ orientation and mobility specialist
- ☐ other (specify)
- ☐ physical therapist
- ☐ registered psychologist
- ☐ school liaison worker
- ☐ school/guidance counsellor
- ☐ social worker
- ☐ special education consultant/lead teacher
- ☐ speech language pathologist
- ☐ vision consultant

4. DECLARATION

Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3a - 3e are in place, a current IPP is included in the student's file, and the student meets the 2014/2015 severe disabilities coding criteria.

Date _____ **Signature of school authority designate** _____

Sample Chart for Recording Anecdotal Information – Code 42

Student: **School:**

Grade: **Week:**

Behaviour	Frequency	Location	Context	Function of Behaviour	Adult Response	Result
What does the student say or do that is problematic? (No judgments or conclusions, just what was observed.)	How many times during the week was each behaviour observed?	Where is each behaviour occurring?	What was the student asked to do? What happened immediately prior to the student engaging in the problematic behaviour?	What was the student trying to get or to avoid?	How did the observing adults respond to the student's behaviour?	Did the student comply or was there further escalation immediately following the adult response? How was the incident resolved?

Teacher's signature: _____ Date:

Chart for Recording Anecdotal Information – Code 42

Student:			School:			
Grade:			Week:			
Behaviour	**Frequency**	**Location**	**Context**	**Function of Behaviour**	**Adult Response**	**Result**

Teacher's signature _____ Date _____

Behaviour and
Social Participation

Behaviour Support Plan (Template)

Student Name ..... Age ..... Grade .....

Objective of plan
Staff working with ..... will commit to using behaviour support strategies to maintain a safe environment for ..... other students and staff.

Key understandings about .....
(Functions of problem behaviour)

.....

.....

.....

Plan

1. Staff working with ..... will read and sign this plan.
2. Be aware of antecedent events. Problem behaviour is most likely to occur when:

   .....

   .....

   .....
3. Be aware of warning signs that problem behaviour may escalate.

   .....

   .....

   .....
4. Immediate plans to defuse the situation

   .....

   .....

   .....
5. Positive behaviour supports throughout the school year

   .....

   .....

   .....

Behaviour and
Social Participation

Behaviour Support Plan (Template)

Student Name ..... Age ..... Grade .....

6. Help peers learn to:

.....

.....

.....

7. Staff will provide additional support by:

.....

.....

.....

.....

.....

Crisis Management Plan

If aggressive or unsafe behaviour occurs in spite of proactive strategies, the school plan is to:

.....

.....

.....

I have read this plan and commit to using these supports when working with

Team members' signatures:

....

....

Date: Review date:

....

Answers to Commonly Asked Questions

The following are answers to commonly asked questions and examples of best practices.

Why does Alberta Education need all this information?
Alberta Education reviews documentation to determine if students meet the criteria for severe disabilities funding for private schools, charter schools and Designated Special Education Private Schools (DSEPS). Criteria include diagnosis, effect of the diagnosis on the student in a learning environment, identified supports and services in place, and current, implemented IPPs. The results of the documentation review are used to approve severe disability funding for private schools, charter schools and DSEPS.

What is the relationship between the diagnosis and the severity of the disability?
Diagnoses are important in determining whether students have special education needs, but the degree of need is determined by the impact of the conditions on school performance and the extent to which accommodations and supports are required for students to learn and be successful in the classroom. The relationship between a clinical diagnosis and the required level of special education programming and supports is not direct. The level of special education need is determined by an assessment of:

- the number of areas of functioning affected
- the extent to which functioning is affected in each area
- the effect on others
- the amount of support required.

What are "services at a cost to the system"?
Additional costs may be incurred only in cases where the professional is working directly with the student related to their disabilities and/or goals and strategies of the IPP. For example, the school counsellor may work directly with an individual student on anger management, on a regularly scheduled basis to help meet a goal on the student's IPP. Cases where the counsellor is working on career counselling, ensuring that a student's homework book is signed, or working with a class on issues, are not eligible levels of support as these services are available to all students. Do not check services in this section unless they are provided 5 or more hours during the school year.

Does principal/administration time qualify as a level of service?
No.

What if all of the student information is not available at the time of the file review?
Student information, including assessment information and the student's IPP, must be in place for review by Alberta Education so that timely approvals of severe disabilities funding can be made.

Glossary

Accommodations (for classroom)	Any changes to instructional strategies, assessment procedures, materials, resources, facilities or equipment.
Assessment data	Diagnostic assessment data used to determine special education programming and services.
Augmentative communication	Technology designed to enhance communication.
Brailler	A machine used to produce braille—a system of writing and printing for persons with vision loss which uses raised points or dots.
Current documentation	Current documentation refers to assessment data from specialists, including educational assessments; medical/health assessments such as vision, hearing, physical, neurological; speech and language assessments; occupational therapy, physiotherapy, behavioural, psychological or psychiatric assessments. Current assessment data/documentation is generally considered to be data that has been collected within the last two or three years.
Frequency modulation (FM) system	An amplification system that is worn by the student with hearing loss. The speaker/ teacher wears a microphone and the speaker's voice is transmitted to a receiver which is directed into the student's hearing aids.
Functional assessment	Includes both formal (some objective data such as a standardized behavioural checklist) and anecdotal and/or direct observations. In addition to a description of clinically relevant behaviour, the assessment should provide information on the student's functioning in the school environment in such areas as: • social functioning • organization/independent work skills related to both academic and non-academic tasks • life skills • safety and support needs
Sound field amplification system	An amplification system that allows all students to hear equally well no matter where they are located in the classroom. The system consists of a wireless microphone used by a speaker, with the voice being amplified within the room.

Resources

Administration Resources

The following Alberta Education resources are available on the department's website at: www.education.alberta.ca.

- *Funding Manual for School Authorities 2014-2015 School Year* http://education.alberta.ca/admin/funding/manual.aspx
- *Requirements for Special Education in Accredited-Funded Private Schools* (2006) http://education.alberta.ca/admin/supportingstudent/schoolleaders/programming/private.aspx`
- *Special Education Coding Criteria 2014/2015* http://education.alberta.ca/admin/supportingstudent/schoolleaders/programming/access.aspx

Supporting Every Student Resources

Alberta Education resources to support the education of students with diverse learning needs can be accessed via the Supporting Every Student website under the Diverse Learning Needs section:
http://education.alberta.ca/admin/supportingstudent/diverselearning.aspx .

A number of valuable resources can be accessed here, including:

- *Medical/Disability Information for Classroom Teachers*
- *Take Ten Spotlight Series: Strategies & Tools for Teaching Students with Learning Disabilities/ADHD: http://education.alberta.ca/teachers/resources/connection/archive/may-2013/inclusiveed/take.aspx*
- *Unlocking Potential: Key Components of Programming for Students with Learning Disabilities*
- *Focusing on Success: Teaching Students with Attention Deficit/Hyperactivity Disorder*
- *Teaching Students with Autism Spectrum Disorders*
- *Teaching Students with Fetal Alcohol Spectrum Disorder*
- *Re: Defining Success – A team approach to supporting students with FASD*
- *Fetal Alcohol Spectrum Disorder Alberta Cross Ministry Initiative*
- *Students who are Deaf or Hard of Hearing*
- *Minerva Deaf Research Lab: http://mdrl.educ.ualberta.ca/*
- *Students who are Blind or Visually Impaired*
- *Vision Education Alberta Website*: http://www.vision.alberta.ca/

Inclusive Education Library:
http://www.learnalberta.ca/content/ieptLibrary/index.html
This digital resource can be accessed to provide information on instructional strategies and supports for students, medical conditions and disabilities information, and sample IPP templates for students with special education needs.

Inclusive Education: Support for Implementation
http://inclusiveeducationpdresources.com/
This website provides a variety of accessible learning opportunities to support implementation of an inclusive learning environment.

Literacy for All: http://literacyforallab.weebly.com
The purpose of this web site is to provide information and strategies for teachers in Alberta who want to learn more about literacy and communication instruction for students with significant disabilities.

Numeracy for All: http://numeracyforall.weebly.com
The purpose of this web site is to provide information and strategies for teachers in Alberta who want to learn more about mathematics instruction and numeracy development for students with significant disabilities.

Learning Technologies Website: http://www.learningtechnologiesab.com/
This web site provides information about the ways that technology in the classroom can be leveraged to address diverse learning needs.

Making a Difference: Meeting Diverse Learning Needs with Differentiated Instruction (2010)
This resource provides a synthesis of current research and an introduction to the theory and practice of differentiated instruction within an Alberta context. It offers general information and strategies for differentiating instruction, ideas for differentiating learning and teaching specific student groups and practical, curriculum-specific ideas and strategies with the core subjects of English language arts, mathematics, social studies and science. See
http://education.alberta.ca/admin/supportingstudent/instructionalsupports.aspx

Building on Success: Helping Students Make Transitions from Year to Year (2006)
http://education.alberta.ca/admin/supportingstudent/instructionalsupports.aspx

The Learning Team: A Handbook for Parents of Children with Special Needs (2003)
http://education.alberta.ca/admin/supportingstudent/engagingparents/learningteam.aspx

Supporting Positive Behaviour in Alberta Schools (2008)
This three-part resource provides information, strategies, stories from schools and sample tools for systematically teaching, supporting and reinforcing positive behaviour. This integrated system of school-wide classroom management and individual student support is designed to provide school staff with effective strategies to improve behavioural outcomes in their school. The resource is available in pdf format at
http://education.alberta.ca/admin/supportingstudent/diverselearning.aspx

- Part 1: *Supporting Positive Behaviour in Alberta Schools: A school-wide approach*
  Describes a comprehensive school-wide approach that involves **all** students, **all** staff and **all** school settings.

- Part 2: *Supporting Positive Behaviour in Alberta Schools: A classroom approach*
  Provides information and strategies for systematically teaching, supporting and reinforcing positive behaviour in the classroom.
- Part 3: *Supporting Positive Behaviour in Alberta Schools: An intensive individualized approach*

  Provides information and strategies for providing intensive, individualized support and instruction for the small percentage of students requiring this level of intervention and includes samples of behavior collection documents and an individual behaviour support plan.

Positive Behaviour Supports: Climbing for Success.
An e-learning website for school staff supporting students with FASD and other disabilities. Mount Royal University. www.pbsc.info